

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00037443

2 PAGE #
1/22

**3 CANDIDATE /
OFFICEHOLDER
NAME**

MS / MRS / MR

FIRST

MI

John

NICKNAME

LAST

SUFFIX

Cook

OFFICE USE ONLY

Date Received

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

3224 Mesa Verde Lane

El Paso TX 79904



Change of Address

Date Hand-delivered or Date Postmarked

Receipt #

Amount

**5 CAMPAIGN
TREASURER
NAME**

MS / MRS / MR

FIRST

MI

Suzanne, E.

NICKNAME

LAST

SUFFIX

Moody

Date Processed

Date Imaged

**6 CAMPAIGN
TREASURER
ADDRESS**

(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

3213 Zion

El Paso TX 79904

**7 CAMPAIGN
TREASURER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

() -

8 REPORT TYPE


January 15



30th day before election



Runoff

15th day after campaign treasurer
appointment (officeholder only)

July 15



8th day before election



Exceeded \$500 limit



Final report (Attach C/OH - FR)

**9 PERIOD
COVERED**

Month

Day

Year

THROUGH

Month

Day

Year

05/02/2009

07/15/2009

10 ELECTION

ELECTION DATE

Month

Day

Year

ELECTION TYPE



Primary



Runoff



General



Special

11 OFFICE
OFFICE HELD (if any)
Other -- Mayor
12 OFFICE SOUGHT (if known)
**13 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS**

.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..

Name

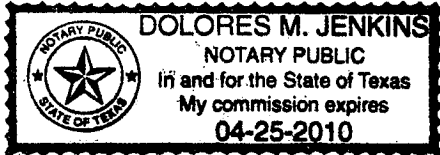
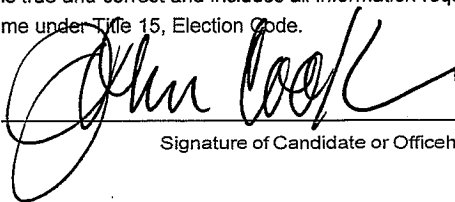
Address/PO Box; Apt. / Suite #; City; State; Zip Code



additional pages

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME <u>John Cook</u>		16 ACCOUNT # (Ethics Commission Filers) <u>000 37443</u>
17 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	** This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
	CITY CLERK DEPT. 09 JUL 13 PM 5:15	
18 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00 \$ 10,995.00 \$ 0.00 \$ 30,553.17 \$ 257.74 \$ 3,000.00
19 AFFIDAVIT		
		I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  _____ Signature of Candidate or Officeholder
AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said <u>John F. Cook</u> , this the <u>13th</u> day of <u>July</u> , 20 <u>09</u> , to certify which, witness my hand and seal of office. <u>Dolores M. Jenkins</u> <u>Dolores M. Jenkins</u> <u>Notary</u> Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # 3/22	
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443	
4 Date 05/08/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ernesto Anaya 6 Contributor address; City; State; Zip Code 11185 Gateway West El Paso TX 79935	7 Amount of contribution (\$) 300.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thanh Berlit Contributor address; City; State; Zip Code 4747 B Hondo Pass El Paso TX 79904	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Katherine Brennan Contributor address; City; State; Zip Code 6006 N. Mesa Ste 105 El Paso TX 79912	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brock and Bustillos Contributor address; City; State; Zip Code 417 Executive Center Blvd El Paso TX 79902	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sergio Cabada Contributor address; City; State; Zip Code 5925 Cromo Dr Apt 1 El Paso TX 79912	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

09 JUL 13 PM 5:16
CITY CLERK DEPT.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

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2 FILER NAME John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date 5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Mary Cano

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

05/08/2009

6 Contributor address; City; State; Zip Code
3025 Taylor

250.00

El Paso TX 79930

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
Lee Chayes

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/06/2009

Contributor address; City; State; Zip Code
845 Rosinante

500.00

El Paso TX 79922

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
Tony and Elodia Conde

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/02/2009

Contributor address; City; State; Zip Code
767 Via Lanza

250.00

El Paso TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
William Correa

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/06/2009

Contributor address; City; State; Zip Code
11040 Mirage Ct.

300.00

El Paso TX 79936-1060

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
Carl and Betty Daniels

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/06/2009

Contributor address; City; State; Zip Code
6461 Via Ventura

500.00

El Paso TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date

05/06/2009

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Steve and Marie Franco6 Contributor address; City; State; Zip Code
1221 Lonewood

El Paso TX 79925

7 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/02/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Marissa Garland-RogersContributor address; City; State; Zip Code
701 Rim Road

El Paso TX 79902-2737

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/05/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Woody and Gale HuntContributor address; City; State; Zip Code
PO Box 12220

El Paso TX 79913-0220

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
SCHERR F. JAMESContributor address; City; State; Zip Code
109 N. OREGON

EL PASO TX 79901

Amount of
contribution (\$)In-kind contribution
description (if applicable)
In kind contribution, hos -
ted fundraiser at Double -
tree Hotel

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/08/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Stanley JobeContributor address; City; State; Zip Code
5588 Westside Drive

El Paso TX 79932

Amount of
contribution (\$)

1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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CITY CLERK DEPT.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

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2 FILER NAME John Cook

3 ACCOUNT # (Ethics Commission filers)
000374434 Date 5 Full name of contributor ☐ out-of-state PAC(ID# _____)
05/02/2009 Andre Karam7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

05/02/2009

6 Contributor address; City; State; Zip Code
Mesa and Montana

100.00

El Paso TX 79902

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
05/10/2009 Kiki's RestaurantAmount of
contribution (\$)In-kind contribution
description (if applicable)
In kind contribution of f -
ood for victory party

05/10/2009

Contributor address; City; State; Zip Code
2719 N. Piedras

El Paso TX 79930

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
05/02/2009 Deborah KingAmount of
contribution (\$)In-kind contribution
description (if applicable)

05/02/2009

Contributor address; City; State; Zip Code
801 N. Cotton
Suite 5
El Paso TX 79902

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
05/21/2009 Rodney KroegerAmount of
contribution (\$)In-kind contribution
description (if applicable)

05/21/2009

Contributor address; City; State; Zip Code
5427 Davis Cup

250.00

El Paso TX 79932

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
05/02/2009 McNeil Living TrustAmount of
contribution (\$)In-kind contribution
description (if applicable)

05/02/2009

Contributor address; City; State; Zip Code
2222 Florence

100.00

El Paso TX 79902

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

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2 FILER NAME John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date 5 Full name of contributor ☐ out-of-state PAC(ID# _____)
05/09/2009 Deane Miller

7 Amount of
contribution (\$) 300.00

8 In-kind contribution
description (if applicable)

6 Contributor address; City; State; Zip Code
4800 N. Stanton Unit 87

El Paso TX 79902-1229

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
05/21/2009 Mervin and Linda Moore

Amount of
contribution (\$) 250.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code
519 E. Hague

El Paso TX 79902

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
05/08/2009 Georgina and Arturo Munoz

Amount of
contribution (\$) 500.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code
5468 Cactus Hill Dr

El Paso TX 79912-6307

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
05/21/2009 Leonard and Nancy Nordell

Amount of
contribution (\$) 250.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code
5160 Memory Drive

El Paso TX 79932-2246

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor ☐ out-of-state PAC(ID# _____)
05/08/2009 Alejandro Orozco

Amount of
contribution (\$) 500.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code
5924 Ojo de Agua

El Paso TX 79912

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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CITY CLERK DEPT.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

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2 FILER NAME John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date

05/08/2009

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Eduardo Orozco

6 Contributor address; City; State; Zip Code
440 Camino Real

El Paso TX 79922

7 Amount of
contribution (\$)

500.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Raba Kistner PAC

Contributor address; City; State; Zip Code
PO Box 690287

San Antonio TX 78269-0287

Amount of
contribution (\$)

1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/10/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Marc and Joe Rosales

Contributor address; City; State; Zip Code
1400 Montana

El Paso TX 79902

Amount of
contribution (\$)

In-kind contribution
description (if applicable)
In kind contribution hos -
ted victory party at Rosa -
les Law Firm

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
JONATHAN SCHWARTZ

Contributor address; City; State; Zip Code
6006 BALCONES #16

EL PASO TX 79912

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Richard Saab

Contributor address; City; State; Zip Code
5713 Pebble Beach Dr

El Paso TX 79912-4115

Amount of
contribution (\$)

165.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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CITY CLERK DEPT.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

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2 FILER NAME John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date

05/02/2009

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Robert Saab6 Contributor address; City; State; Zip Code
707 Myrtle

El Paso TX 79901

7 Amount of
contribution (\$)

165.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

05/09/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
William SaabContributor address; City; State; Zip Code
700 Camino Real

El Paso TX 79922

Amount of
contribution (\$)

165.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/10/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Sam's Oriental RestaurantContributor address; City; State; Zip Code
1501 Yandell

El Paso TX 79902

Amount of
contribution (\$)In-kind contribution
description (if applicable)
In kind contribution of f -
ood for victory party

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Jody SchwartzContributor address; City; State; Zip Code
6006 Balcones #16

El Paso TX 79912

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/08/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Allen SharpeContributor address; City; State; Zip Code
6012 Alcalá Ct

El Paso TX 79932

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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CITY CLERK DEPT.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

10/22

2 FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)

00037443

4 Date

05/02/2009

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
John Trien**6** Contributor address; City; State; Zip Code
9565 Dyer

El Paso TX 79924

7 Amount of
contribution (\$)

500.00

8 In-kind contribution
description (if applicable)**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

05/02/2009

Full name of contributor ☐ out-of-state PAC(ID# _____)
Russell and Marty VandenburgContributor address; City; State; Zip Code
5594 Westside Drive

El Paso TX 79932-2914

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

CITY CLERK DEPT.
09 JUL 13 PM 5:17

LOANS

SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
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2 FILER NAME John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 TOTAL OF UNITEMIZED LOANS: $\Rightarrow \Rightarrow \Rightarrow \Rightarrow \Rightarrow \Rightarrow$ \$ 0.00

5 Date of loan 06/05/2009	7 Name of lender Tram Cook <input type="checkbox"/> out-of-state PAC (ID# _____)	9 Loan Amount (\$) 1000.00
6 Is lender a financial Institution? N	8 Lender address; City; State; Zip Code 3224 Mesa Verde Lane El Paso TX 79904	10 Interest rate 0
		11 Maturity date

12 Principal occupation / Job title (See Instructions) **13** Employer (See Instructions)

14 Description of Collateral
☒ none

15 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	16 Name of guarantor 17 Guarantor address; City; State; Zip Code 3224 Mesa Verde Lane El Paso TX 79904	18 Amount Guaranteed (\$)
---	---	----------------------------------

19 Principal Occupation **20** Employer

Date of loan 07/10/2009	Name of lender Tram Cook <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$) 2000.00
Is lender a financial Institution? N	Lender address; City; State; Zip Code 3224 Mesa Verde Lane El Paso TX 79904	Interest rate 0
		Maturity date

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Description of Collateral
☒ none

GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code 3224 Mesa Verde Lane El Paso TX 79904	Amount Guaranteed (\$)
--	---	-------------------------------

Principal Occupation Employer

09 JUL 13 PM 5:17
CITY CLERK DEPT.

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
12/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443**4** Date**5** Payee name
AT&T**7** Amount
(\$)

05/18/2009

6 Payee address; City; State; Zip Code

TX

30.00

8 Purpose of payment (See instructions regarding type of
information required.)
1570 www.johnfcook.com**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
AT&TAmount
(\$)

05/18/2009

Payee address; City; State; Zip Code

TX

60.00

Purpose of payment (See instructions regarding type of
information required.)
#1569 cellular phone service** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
AlbertsonsAmount
(\$)

05/05/2009

Payee address; City; State; Zip Code

TX

16.53

Purpose of payment (See instructions regarding type of
information required.)
#1550 Hot dogs with the mayor** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
AlbertsonsAmount
(\$)

05/27/2009

Payee address; City; State; Zip Code

TX

18.48

Purpose of payment (See instructions regarding type of
information required.)
#1577 Visa credit payment feeding the homeless** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
13/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443**4** Date

07/10/2009

5 Payee name
Ballyhoo Studios**7** Amount
(\$)**6** Payee address; City; State; Zip Code

100 Executive Center

El Paso TX 79902

8 Purpose of payment (See instructions regarding type of information required.)
In kind contribution. Production of four TV Commercials**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/08/2009

Payee name
City of El PasoAmount
(\$)

Payee address; City; State; Zip Code

#2 CIVIC CENTER PLAZA

EL PASO TX 79901

11.00

Purpose of payment (See instructions regarding type of information required.)

#1555 Parking Ticket (Ken Sutherland)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/09/2009

Payee name
City of El PasoAmount
(\$)

Payee address; City; State; Zip Code

#2 CIVIC CENTER PLAZA

EL PASO TX 79901

11.00

Purpose of payment (See instructions regarding type of information required.)

#1557 Parking Ticket (Ken Sutherland)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/27/2009

Payee name
Cricket PhonesAmount
(\$)

Payee address; City; State; Zip Code

El Paso TX

52.80

Purpose of payment (See instructions regarding type of information required.)

#1577 Visa credit card for cellular phones

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

CITY CLERK DEPT.

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
14/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443

4 Date 05/27/2009	5 Payee name Cricket Phones 6 Payee address; City; State; Zip Code El Paso TX	7 Amount (\$) 164.89
---------------------------------	--	---------------------------------------

8 Purpose of payment (See instructions regarding type of information required.) #1577 Visa credit card for campaign cellular phones	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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Date 06/25/2009	Payee name Cricket Phones Payee address; City; State; Zip Code El Paso TX	Amount (\$) 47.80
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Purpose of payment (See instructions regarding type of information required.) #1581 visa payment cellular phones	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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Date 06/25/2009	Payee name Cricket Phones Payee address; City; State; Zip Code El Paso TX	Amount (\$) 164.89
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Purpose of payment (See instructions regarding type of information required.) #1581 visa payment cellular phones	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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Date 07/10/2009	Payee name David's Apparel Payee address; City; State; Zip Code El Paso TX	Amount (\$) 575.20
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Purpose of payment (See instructions regarding type of information required.) Check 1583 T-shirts for poll worker	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
15/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443**4** Date

05/22/2009

5 Payee name
David's Banners**6** Payee address; City; State; Zip Code

Carnige

El Paso TX

7 Amount
(\$)

573.00

8 Purpose of payment (See instructions regarding type of
information required.)
#1571 Signs**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/24/2009

Payee name
David's Banners

Payee address; City; State; Zip Code

Carnige

El Paso TX

Amount
(\$)

2504.91

Purpose of payment (See instructions regarding type of
information required.)#1574 Signs and campaign T-shirts. \$1,008.54 was spent -
on the Carl Robinson Campaign** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

07/10/2009

Payee name
David's Banners

Payee address; City; State; Zip Code

Carnige

El Paso TX

Amount
(\$)

1273.00

Purpose of payment (See instructions regarding type of
information required.)

Check 1582 Signs and sign frames

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/05/2009

Payee name
El Diario

Payee address; City; State; Zip Code

El Paso TX

Amount
(\$)

756.00

Purpose of payment (See instructions regarding type of
information required.)

#1548 Advertisement

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:09 JUL 13 PM 5:17
CITY CLERK DEPT.

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
16/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443

4 Date 05/27/2009	5 Payee name El Jacalito Restaurant 6 Payee address; City; State; Zip Code Myrtle avenue El Paso TX	7 Amount (\$) 49.48
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8 Purpose of payment (See instructions regarding type of information required.) #1577 visa credit card lunch for campaign workers	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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Date 05/05/2009	Payee name El Paso Times Payee address; City; State; Zip Code El Paso TX	Amount (\$) 2084.04
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Purpose of payment (See instructions regarding type of information required.) #1547 Advertisement	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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Date 05/27/2009	Payee name FOOD BASKET Payee address; City; State; Zip Code EL PASO TX 79924	Amount (\$) 54.11
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Purpose of payment (See instructions regarding type of information required.) #1577 Visa credit card for victory party	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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Date 05/07/2009	Payee name Ken Sutherland Payee address; City; State; Zip Code El Paso TX	Amount (\$) 300.00
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Purpose of payment (See instructions regarding type of information required.) #1553 Election day refreshements for campaign workers	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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CITY CLERK DEPT.

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
17/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443**4** Date**5** Payee name

Ken Sutherland

7

Amount

(\$)

05/11/2009

6 Payee address; City; State; Zip Code

2000.00

El Paso TX

8 Purpose of payment (See instructions regarding type of
information required.)
#1565 Campaign management**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name

Annette Levya

Amount

(\$)

05/08/2009

Payee address; City; State; Zip Code

1447.00

El Paso TX

Purpose of payment (See instructions regarding type of
information required.)
#1554 Poll workers** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name

McCoys Lumber

Amount

(\$)

05/09/2009

Payee address; City; State; Zip Code

81.18

El Paso TX

Purpose of payment (See instructions regarding type of
information required.)
#1560 Materials for victory party** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name

Papa John's Pizza

Amount

(\$)

05/09/2009

Payee address; City; State; Zip Code

81.18

El Paso TX

Purpose of payment (See instructions regarding type of
information required.)
#1563 Supplies for victory party** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

CITY CLERK DEPT.

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
18/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443**4** Date

05/05/2009

5 Payee name
Publimate**6** Payee address; City; State; Zip Code

El Paso TX

7 Amount
(\$)

8340.00

8 Purpose of payment (See instructions regarding type of
information required.)
Check 1546 TV Air Time**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/09/2009

Payee name
Publimate

Payee address; City; State; Zip Code

El Paso TX

Amount
(\$)

8010.00

Purpose of payment (See instructions regarding type of
information required.)
#1558 TV Advertisements** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/05/2009

Payee name
Reuel Group

Payee address; City; State; Zip Code

6006 North Mesa

El Paso TX 79912

Amount
(\$)

982.70

Purpose of payment (See instructions regarding type of
information required.)
#1549 Mailing List** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/09/2009

Payee name
Sam's Club

Payee address; City; State; Zip Code

El Paso TX

Amount
(\$)

198.32

Purpose of payment (See instructions regarding type of
information required.)
#1559 Supplies for victory party** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

CITY CLERK DEPT.

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
19/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443

4 Date 05/09/2009	5 Payee name Sam's Club 6 Payee address; City; State; Zip Code El Paso TX	7 Amount (\$) 37.44
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8 Purpose of payment (See instructions regarding type of information required.)
#1562 supplies for victory party**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date 07/10/2009	Payee name Sonny Melendrez Creative Services Payee address; City; State; Zip Code 14439 NW Military Highway Ste 108 -109 San Antonio TX 78231	Amount (\$) 400.00
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Purpose of payment (See instructions regarding type of information required.)
#1584 video for web-TV** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date 05/27/2009	Payee name Super Burro Restaurant Payee address; City; State; Zip Code Dyer El Paso TX	Amount (\$) 53.91
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Purpose of payment (See instructions regarding type of information required.)
#1577 Visa credit card Lunch for campaign workers** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date 05/09/2009	Payee name Swifco Payee address; City; State; Zip Code El Paso TX	Amount (\$) 13.00
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Purpose of payment (See instructions regarding type of information required.)
#1564 Materials for signs** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

CITY CLERK DEPT.

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
20/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443**4** Date

05/27/2009

5 Payee name
U.S. Postmaster**6** Payee address; City; State; Zip Code

El Paso TX

7 Amount
(\$)

44.00

8 Purpose of payment (See instructions regarding type of information required.)

#1575 Stamps for thank you cards

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/28/2009

Payee name
U.S. Postmaster

Payee address; City; State; Zip Code

El Paso TX

Amount
(\$)

44.00

Purpose of payment (See instructions regarding type of information required.)

#1576 stamps for thank you cards

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date

05/11/2009

Payee name
Vantage Point

Payee address; City; State; Zip Code

1109 Arizona

El Paso TX 79902

Amount
(\$)

73.31

Purpose of payment (See instructions regarding type of information required.)

#1566 Push Cards

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

09 JUL 13 PM 5:17

CITY CLERK DEPT

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
21/22

2 FILER NAME John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date 05/07/2009	5 Payee name Matthew Ambriz Family 6 Payee address; City; State; Zip Code El Paso TX 7 Purpose of expenditure (See instructions regarding type of information required.) #1552. Contribution to assist 7 year old cancer patient	8 Amount (\$) 500.00
Date 05/22/2009	Payee name Blessed Sacrament Payee address; City; State; Zip Code El Paso TX Purpose of expenditure (See instructions regarding type of information required.) #1572 Donation for repairs	Amount (\$) 100.00
Date 05/31/2009	Payee name FOOD BASKET Payee address; City; State; Zip Code EL PASO TX 79924 Purpose of expenditure (See instructions regarding type of information required.) #1578 Feed the Homeless	Amount (\$) 59.78
Date 06/01/2009	Payee name FOOD BASKET Payee address; City; State; Zip Code EL PASO TX 79924 Purpose of expenditure (See instructions regarding type of information required.) #1579 Feed the homeless	Amount (\$) 38.58
Date 05/07/2009	Payee name FallenBiker Coalition Payee address; City; State; Zip Code El Paso TX 79999 Purpose of expenditure (See instructions regarding type of information required.) #1551 Contribution to assist a recent crash victim	Amount (\$) 100.00

09 JUL 13 PM 5:17

CITY CLERK DEPT.

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS****SCHEDULE I**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
22/22**2** FILER NAME John Cook**3** ACCOUNT # (Ethics Commission filers)
00037443

4 Date 05/27/2009	5 Payee name IHOP 6 Payee address; City; State; Zip Code Hawkins/Gateway El Paso TX 79925 7 Purpose of expenditure (See instructions regarding type of information required.) #1577 Visa credit card payment. Breakfast mtg with MPO	8 Amount (\$) 48.10
Date 05/08/2009	Payee name Muscular Dystrophy Association Payee address; City; State; Zip Code El Paso TX 79999 Purpose of expenditure (See instructions regarding type of information required.) #1556 MDA Banquet - Contribution	Amount (\$) 200.00
Date 06/02/2009	Payee name Star Western Wear Payee address; City; State; Zip Code Overland Street El Paso TX Purpose of expenditure (See instructions regarding type of information required.) #1580 Gift for TML Board Mtg in El Paso	Amount (\$) 100.00
Date 06/05/2009	Payee name United Bank Payee address; City; State; Zip Code PO 246 El Paso TX 79943 Purpose of expenditure (See instructions regarding type of information required.) Bank Service Charges. Includes NSF charges for 1552,1579,1578,1580	Amount (\$) 105.00

09 JUL 13 PM 5:17
CITY CLERK DEPT.